### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6303

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Account Name : DALIA ACCOUNTING SERVICE

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Phone : (561) 478-1777

Fax Number

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CUSTOM CABINETS BY MASSO, LLC.

Certificate of Status	0
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Corporate Filing Menu

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DALIA ACCOUNTING SVC

# (H110001006413)

SECRETARY OF STATE
DIVISION OF CORPORATIONS

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

11 APR 25 AM 8: 39

	CUSTOM CABINETS BY MASS	O, LLC.	
(Na	me of the Limited Liability Company as it now appe (A Florida Limited Liability Company)	ars on our records.)	
The Articles of Organization	for this Limited Liability Company were filed on	11/01/2004	and assigned
Florida document number	L07000089575		·
This amendment is submitted	to amend the following:		
A. If amending name, enter	the new name of the limited liability company he	re;	
The new name must be distinguing. "L.L.C."	shable and end with the words "Limited Liability Comp	eany," the designation "L	LC" or the abbreviation
Enter new principal offices a	ddress, if applicable:		
(Principal office address MU.	ST BE A STREET ADDRESS)		
Enter new mailing address, i	f applicable:		
(Mailing address MAY BE A			
	red agent and/or registered office address on ew registered office address here:	our records, <u>enter th</u>	e name of the now
Name of New Regist	ered Agent:		
New Registered Offi		nter Florida street addre	955
	Li	Emer I torida sireet adaress	
	City	, Florids	Zip Code
Niam. Danista and America Cim	Stalian ato a 70 talian di Amerika		

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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MGR = Manager

## (H110001006413)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGRM = Managing Member <u>Title</u> <u>Name</u> Address Type of Action MGR NANCY I. MASSO 3528 VICTORIA DR ✓ Add WEST PALM BEACH FL 33406 Remove ☐ Add ☐ Remove 🛅 Remove Remove  $\prod Add$ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 4-25-2011 Dated gnature of a member or authorized representative of a member rlando Masso Typed or printed name of signee

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Filing Fee: \$25.00

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